UNITED STATES DISTRICT COURT DISTRICT OF OREGON

| Calista Enterprises Ltd. | | | Civil Case No. <u>S</u> | | 13-01-01045 | | |
|---|--|--|-------------------------|-------------------------------|-------------|--------------------------|--|
| Plainti | ff(s), | The second secon | | PLICATION FO DMISSION – PA | | | |
| | ₩. | | | | | | |
| Tenza Tradir | ng Ltd. | | | | | | |
| () | | Making disease and Making an | | | | | |
| Defend | lant(s). | | | | | | |
| Attorne | y Valentin David Gur | vits | re | equests special a | dmissio | n <i>pro hac vice</i> in | |
| the above-captioned case. | | | | | | | |
| Certification of Attorney Seeking <i>Pro Hac Vice</i> Admission: I have read and understand the requirements of LR 83-3, and certify that the following information is correct: | | | | | | | |
| (1) | PERSONAL DATA: | | | | | | |
| | Name: Gurvits, Valent | tin David | | | | | |
| | (Last Name) | (First | | | (MI) | (Suffix) | |
| | Firm or Business Affiliation: Boston Law Group, PC | | | | | | |
| | Mailing Address: | 825 Beacon S | Street, | Suite 20 | | | |
| | City: Newton Centre | | State: | MA | Zip: | 02459 | |
| | Phone Number: 617-92 | | | Fax Number: | | | |
| | Business E-mail Address: | vgurvits@bo | ostonia | | | | |

| (2) | BAR | BAR ADMISSIONS INFORMATION: | | | | |
|-----|--|--|--|--|--|--|
| | (a) | State bar admission(s), date(s) of admission, and bar ID number(s): Massachusetts - December 14, 1999 - 643572 | | | | |
| | (b) | Other federal court admission(s), date(s) of admission, and bar ID number(s): District of Massachusetts - April 15, 2004 | | | | |
| (3) | CERT | TIFICATION OF DISCIPLINARY ACTIONS: | | | | |
| | (a) | I am not now, nor have I ever been subject to any disciplinary action by any state or federal bar association; or | | | | |
| | (b) | I am now or have been subject to disciplinary action from a state or federal bar association. (See attached letter of explanation.) | | | | |
| (4) | CERTIFICATION OF PROFESSIONAL LIABILITY INSURANCE: | | | | | |
| | I have | a current professional liability insurance policy in the amount of \$\frac{1,000,000}{11}\$ apply in this case, and that policy will remain in effect during the course of these | | | | |
| (5) | REPR | ESENTATION STATEMENT: | | | | |
| | I am re Calist | presenting the following party(s) in this case: a Enterprises Ltd. | | | | |
| | *************************************** | | | | | |
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| Concurrent with approval of this <i>pro hac vice</i> application, I acknowledge that I will become a registered user of the Court's Case Management/Electronic Case File system. (See the Court's website at <u>ord.uscourts.gov</u>), and I consent to electronic service pursuant to Fed. R. Civ. P 5(b)(2)(E) and the Local Rules of the District of Oregon. | | | | | | | |
|--|--------------------------------|--|--|--|--|--|--|
| DATED this 20 day of JVVE, 2 | 013 | | | | | | |
| | Mel | | | | | | |
| (Signatule of Pro Hac Counsel) | | | | | | | |
| Valentin David Gurvits (Typed Name) | | | | | | | |
| (1ypea No | me) | | | | | | |
| CERTIFICATION OF ASSOCIATED LOCAL COUNSEL: | | | | | | | |
| I certify that I am a member in good standing of the bar of this Court, that I have read and understand the requirements of LR 83-3, and that I will serve as designated local counsel in this particular case. | | | | | | | |
| DATED this 2/57 day of July , 2013 | | | | | | | |
| | | | | | | | |
| (Signature | e of Local Counsel) | | | | | | |
| Name: Freedman, Thomas Jr. | | | | | | | |
| (Last Name) (First Name) | (MI) (Suffix) | | | | | | |
| Oregon State Bar Number: 080697 | | | | | | | |
| Firm or Business Affiliation: Pearl Law LLC | | | | | | | |
| Mailing Address: 522 SW 5th Avenue Suite 1100 | | | | | | | |
| | Oregon Zip: 97204 | | | | | | |
| | ail Address: thomas@prllaw.com | | | | | | |
| 240000000000000000000000000000000000000 | | | | | | | |
| | | | | | | | |
| COURT ACTION | | | | | | | |
| ☐ Application approved subject to ☐ Application denied. | payment of fees. | | | | | | |

Judge

U.S. District Court-Oregon Revised March 6, 2013

DATED this _____ day of ___

(6)

CM/ECF REGISTRATION:

Application for Special Admission - Pro Hac Vice Page 3 of 3